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NC Medicaid Increasing Eligible Technology and Provider Types for Telemedicine to Address COVID-19

Raleigh

Mar 20, 2020

NC Medicaid today announced several policy changes around the use of telemedicine in response to COVID-19. These changes will enable Medicaid beneficiaries to continue to access the care they need.

Effective Monday, March 23, 2020, Medicaid is temporarily modifying its Telemedicine and Telepsychiatry Clinical Coverage Policies to better enable the delivery of remote care to Medicaid beneficiaries. In addition to telephone conversations and secure electronic messaging, the modifications will include the use of two-way real-time interactive audio and video to provide and support physical and behavioral health care when participants are in different physical locations.

Telehealth refers broadly to electronic and telecommunications technologies and services used to provide care and services at a distance. Telehealth encompasses a range of practices, including telemedicine and telepsychiatry, which use two-way, real-time interactive audio and

video between provider and patient to deliver health care and behavioral health services, respectively. Virtual patient communication is another part of telehealth used to provide evaluation and consultation between provider and patient or between different providers.

Medicaid policy changes include:

- Payment parity for approved services, meaning providers will be paid the same fee for a service regardless of whether it is provided in-office or via an approved technology platform;
- Expanding eligible telehealth technologies to any HIPAA-compliant, secure technology with audio and video capabilities, including (but not limited to) smart phones, tablets and computers;
- Expanding the types of provider that can provide telehealth to include clinical pharmacists, licensed clinical mental health counselors (LCMHCs), licensed marriage and family therapists (LMFTs), licensed clinical addiction specialists (LCASs), and licensed psychological associates (LPAs);
- Expanding the list of eligible originating sites, which is where the patient may be located (e.g., health care facilities, community sites, the home) and distant sites, which is wherever the provider is located (Federally Qualified Health Centers (FQHCs), and Rural Health Centers (RHCs) are considered eligible distant sites); and
- Eliminating the need for some prior authorizations and referrals.

These changes will be retroactive to March 10, 2020 and will remain in effect until the North Carolina State of Emergency is declared over or when this policy is rescinded, whichever comes first. Medicaid will continue to release telehealth policy provisions and will continue to evaluate this policy throughout the state of emergency period.

For more information, visit Special COVID-19 Medicaid Bulletin #7: Telehealth Providers – Clinical Policy Modification on the [Medicaid website \(https://medicaid.ncdhhs.gov/providers/medicaid-bulletin\)](https://medicaid.ncdhhs.gov/providers/medicaid-bulletin) at <https://medicaid.ncdhhs.gov/providers/medicaid-bulletin> (<https://medicaid.ncdhhs.gov/providers/medicaid-bulletin>).

Additional telehealth details and guidance will be available online at www.medicare.gov/coronavirus (<https://medicaid.ncdhhs.gov/about-us/coronavirus-disease-2019-covid-19-and-nc-medicare>).

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